

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SLD</i>	<i>69801</i>	<i>7/10</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>7/11/9</i>
FORMALITY REVIEW	<i>2 F. M. H.</i>	<i>7676</i>	<i>6-17-10</i>
RESPONSE FORMALITY REVIEW		<i>67471</i>	<i>12/21/8</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted C Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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